PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number 10/647735

Effective January 1, 2004							•			7		3
CLAIMS AS FILED - PART I (Column 1) (Col						umn 2)	SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS							RAT	ET	FEE	7	RATE	FEE
FOR			NUMBER FILED		NUM	NUMBER EXTRA		FEE	\$375		BASIC FEE	·
TOTAL CHARGEABLE CLAIMS			minus 20= 1		*		X\$ 9		Ψοιο	1	V#40	4700.
INDEPENDENT CLAIMS			minus 3 = *		*			-	<u> </u>	OR		·
MULTIPLE DEPENDENT CLAIM PR				RESENT			X43		and the state of t	OR	X8 6 =	
ن	f the difference	o in column 1 is	logo than	less than zero, enter "0" in column 2				=		OR	+290=	
* If the difference in column 1 is less than zero, enter "0" in column 2 6/30/6 CLAIMS AS AMENDED - PART II						TOTA	L	·	OR	TOTAL		
6	130/04	(Column 1)	AMENDE	(Column 2) (Column 3)				L EN	TITY	OR	OTHER SMALL	
MENTA		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR			RATE	: TI	ADDI- ONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMEN	Total	* 12	Minus	** 2	8	2	X\$ 9			OR	X\$18=	
AME	Independent	* 2.	Miņus	***	3	=	X43=			OR	X86 =	
		ENTATION OF M	OLIPLE DE	PENDENI	CLAIM		+145=	3		OR	+290=	
							ADDIT, FE			OR ,	TOTAL ADDIT. FEE	
		(Column 1)		(Colum		(Column 3)						
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ER USLY	PRESENT EXTRA	RATE	TIC	DDI- DNAL EE		RATE	ADDI- TIONAL FEE
NDN	Total	*	Minus	**	,	=	X\$ 9=			OR	X\$18=	
AME	Independent	*	Minus	***	OL A!A.	= -	X4 3 =			OR	X8 6 =	
	rino i Pricoc	NTATION OF MI	JUI IPLE DEI	ZENDENT	CLAIM		+145=			OR	+290=	
٠				·			TOTA ADDIT. FE			ORI A	TOTAL DDIT. FEE	
		(Column 1)		(Colum	n 2)	(Column 3)				•		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOL PAID FO	ER JSLY	PRESENT EXTRA	RATE	TIC	DDI- DNAL EE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9=			OR	X\$18=	•
	Independent	*	Minus .	***		=	X4 3 =	1		F	X86=	
-	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	PENDENT (CLAIM			1-		OR		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										DR	+290=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." TOTAL ADDIT. FEE ADDIT. FEE TOTAL ADDI												